# SIKKIM

# GOVERNMENT



# GAZETTE

# EXTRAORDINARY PUBLISHED BY AUTHORITY

Gangtok

Tuesday 13

13th May, 2014

No. 196

# GOVERNMENT OF SIKKIM HEALTH CARE, HUMAN SERVICES & FAMILY WELFARE DEPARTMENT

No: 61 (E) /HC, HS & FW

Dated: 07.05.2014

#### NOTIFICATION

Whereas, as per the guideline of Government of India, the Regional quality assurance unit is required to be constituted to roll out the Quality Assurance programme at the State levels;

AND whereas, Sikkim being a small State the need for regional quality assurance unit is not required;

AND whereas, STNM hospital is a State referral hospital and is the biggest hospital in the State of Sikkim;

AND whereas, the State Government felt it necessary to constitute Quality Assurance team/unit at STNM hospital instead of Regional Quality Assurance Unit;

Now, therefore with this object in view, the State Government is hereby pleased to constitute the "State Level Quality Team at STNM Hospital to redress, dispose and disburse for implementation of Quality assurance programme as per procedure and time frame laid down in the manual constituting of the following members, namely:-

1.	Principal Chief Consultant-cum- Medical Superintendent	Chairperson;
2.	Additional Medical Superintendent, STNM Hospital	Member Secretary;
3.	Head of Department Surgery, STNM Hospital	Member;
4.	Head of Department Anaesthesia, STNM Hospital	Member;
<b>5</b> .	Head of Department Obstetric and Gynaecology, STNM Hospital	Member;
6.	Head of Department Microbiology, STNM Hospital	Member;
7.	Medical Officer Hospital Administration, STNM Hospital	Member;
8.	Deputy Nursing Superintendent/ Assistant Nursing Superintendent,	Member;
	STNM Hospital	
9.	Store Officer, STNM Hospital	Member;
10.	Medical Record officer/Technician, STNM Hospital	Member;
11.	Ward Master, STNM Hospital	Member.

#### 1. Terms of Reference

The terms of reference of the state level quality assurance team at STNM Hospital shall be as under:-

### (1). Staff orientation:

- (a) Formal training shall be conducted for the staff of State Quality Team, (STNM) with support from the State Quality Assurance Committee.
- (b) Quality Assurance Team, (STNM) shall orient the medical, paramedical and support staff team including Group C and D to the service standards set by the state.

## (2). Ensuring adherence to quality standards:

- (c) Through regular internal assessments, audits, reviews etc the Quality Assurance Team (STNM) members shall ensure that the standards set for a state hospital are being met.
- (d) Corrective action plans shall be initiated for identified gaps.

## (3 Regular reporting to State Quality Assurance Committee:

- (a) The Quality Assurance Team, STNM shall report regularly to the Quality Assurance Committee on outcome level indicators such as sterilisation deaths, complications and failures as well as maternal and infant deaths.
- (b) The Quality Assurance Team, STNM shall also report to the State Quality Assurance Committee on the internal assessment findings, quality improvement measures undertaken, etc.

## (4) Ensure interdepartmental coordination:

- (a) The Quality Assurance Team, STNM shall liaise with various departments within the facility for effective implementation of Quality Assurance activities.
- (b) To share the internal assessment findings of Quality Assurance Team, STNM and external assessment findings of State Quality Assurance Unit with all the staff at the State hospital.
- (c) Quality Assurance Team (STNM) shall ensure that Departmental Nodal Officers will take corrective actions as per the road map provided by State Quality Team.

### 1. Process:

- (a) Once the Quality Assurance Team, (STNM) is formed, an area for an initial assessment shall be identified in the first meeting.
- (b) For achieving the standards Quality Assurance Team, (STNM) shall undertake the process of filling the check list, scoring the measurable indicators, summing up area wise and services wise gaps.
- (c) Assessments shall be carried out and based on its findings follow up actions to be taken.
- (d) Monitoring of the follow up actions shall be done in the subsequent meetings.
- (e) Assessments shall be followed by time bound action plans along with person responsible for each action shall be prepared.
- (f) Once the Quality Assurance Team, (STNM) completes the assessment and gives service wise/area wise scoring then shall inform and invite State assessors for verification and guidance.

- (4) The Organizational Structures
  - (a) This process shall continue till the State Quality Assurance Committee assessors certify the attainment of the quality standards at the hospital. Then onwards Quality Assurance Team, (STNM) shall ensure maintaining the standards.
  - (b) Facility in-charge and Hospital manager shall do daily rounds to supervise the Quality Assurance activities and sustain the motivational level of the staff.
  - (c) The Quality Assurance Team (STNM) shall meet once every month.

In case of any death following a sterilisation operation, it shall be reported to the convenor of the State Quality Assurance Committee within 24 (Twenty four) hours. Monthly reports of maternal and infant deaths shall also be given to the State Quality Assurance Committee. In case there are no deaths, a NIL report shall mandatorily be sent. State Quality Assurance Committee is responsible for investigating a sterilisation related death and also review of maternal and infant deaths.

By order and in the name of the Governor.

DR. K. BHANDARI, DM
DIRECTOR GENERAL-CUM-SECRETARY TO THE GOVERNMENT OF SIKKIM

S.G.P.G 196/ Gazette/ 30 Cps./	13.05.2014	

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